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Signature

Brett Bilbrey

Typed or printed name of person signing Certificate

408-530-8382

Registration Number, if applicable

Telephone Number

In re PATENT:

Application Number: 09/847,633

Filing Date: May 2, 2001

First Named Inventor: BILBREY, Brett

Art Unit:

Examiner Name:

Attorney Docket Number:

Document(s) transmitted: Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address Form (1 page).

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**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/847,633
Filing Date	May 2, 2001
First Named Inventor	BILBREY, Brett
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby revoke all previous powers of attorney given in the above-identified application.

Applicant is acting as his own representative (pro se) before the Office.

OR

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

The address associated with
Customer Number:

OR

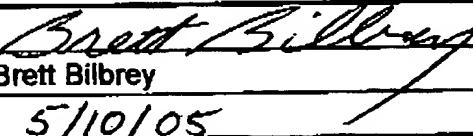
<input checked="" type="checkbox"/> Firm or Individual Name	Brett Bilbrey		
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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Brett Bilbrey		
Date	5/10/05	Telephone	408-530-8382

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 1 forms are submitted.

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